



## 100TH GENERAL ASSEMBLY

### State of Illinois

2017 and 2018

SB3431

Introduced 2/16/2018, by Sen. Sue Rezin

#### SYNOPSIS AS INTRODUCED:

720 ILCS 570/312

from Ch. 56 1/2, par. 1312

Amends the Illinois Controlled Substances Act. Provides that when issuing a prescription for an opiate to a patient 18 years of age or older for outpatient use for the first time, a practitioner may not issue a prescription for more than a 7-day supply. Provides that a practitioner may not issue an opiate prescription to a person under 18 years of age for more than a 7-day supply at any time and shall discuss with the parent or guardian of the person under 18 years of age the risks associated with opiate use and the reasons why the prescription is necessary. Provides that notwithstanding this provision, if, in the professional medical judgment of a practitioner, more than a 7-day supply of an opiate is required to treat the patient's acute medical condition or is necessary for the treatment of chronic pain management, pain associated with a cancer diagnoses, or for palliative care, then the practitioner may issue a prescription for the quantity needed to treat that acute medical condition, chronic pain, pain associated with a cancer diagnosis, or pain experienced while the patient is in palliative care. Provides that the condition triggering the prescription of an opiate for more than a 7-day supply shall be documented in the patient's medical record and the practitioner shall indicate that a non-opiate alternative was not appropriate to address the medical condition. Provides that these provisions do not apply to medications designed for the treatment of substance abuse or opioid dependence. Effective immediately.

LRB100 20798 SLF 36288 b

1 AN ACT concerning criminal law.

2 **Be it enacted by the People of the State of Illinois,**  
3 **represented in the General Assembly:**

4 Section 5. The Illinois Controlled Substances Act is  
5 amended by changing Section 312 as follows:

6 (720 ILCS 570/312) (from Ch. 56 1/2, par. 1312)

7 Sec. 312. Requirements for dispensing controlled  
8 substances.

9 (a) A practitioner, in good faith, may dispense a Schedule  
10 II controlled substance, which is a narcotic drug listed in  
11 Section 206 of this Act; or which contains any quantity of  
12 amphetamine or methamphetamine, their salts, optical isomers  
13 or salts of optical isomers; phenmetrazine and its salts; or  
14 pentazocine; and Schedule III, IV, or V controlled substances  
15 to any person upon a written or electronic prescription of any  
16 prescriber, dated and signed by the person prescribing (or  
17 electronically validated in compliance with Section 311.5) on  
18 the day when issued and bearing the name and address of the  
19 patient for whom, or the owner of the animal for which the  
20 controlled substance is dispensed, and the full name, address  
21 and registry number under the laws of the United States  
22 relating to controlled substances of the prescriber, if he or  
23 she is required by those laws to be registered. If the

1 prescription is for an animal it shall state the species of  
2 animal for which it is ordered. The practitioner filling the  
3 prescription shall, unless otherwise permitted, write the date  
4 of filling and his or her own signature on the face of the  
5 written prescription or, alternatively, shall indicate such  
6 filling using a unique identifier as defined in paragraph (v)  
7 of Section 3 of the Pharmacy Practice Act. The written  
8 prescription shall be retained on file by the practitioner who  
9 filled it or pharmacy in which the prescription was filled for  
10 a period of 2 years, so as to be readily accessible for  
11 inspection or removal by any officer or employee engaged in the  
12 enforcement of this Act. Whenever the practitioner's or  
13 pharmacy's copy of any prescription is removed by an officer or  
14 employee engaged in the enforcement of this Act, for the  
15 purpose of investigation or as evidence, such officer or  
16 employee shall give to the practitioner or pharmacy a receipt  
17 in lieu thereof. If the specific prescription is machine or  
18 computer generated and printed at the prescriber's office, the  
19 date does not need to be handwritten. A prescription for a  
20 Schedule II controlled substance shall not be issued for more  
21 than a 30 day supply, except as provided in subsection (a-5),  
22 and shall be valid for up to 90 days after the date of  
23 issuance. A written prescription for Schedule III, IV or V  
24 controlled substances shall not be filled or refilled more than  
25 6 months after the date thereof or refilled more than 5 times  
26 unless renewed, in writing, by the prescriber. A pharmacy shall

1 maintain a policy regarding the type of identification  
2 necessary, if any, to receive a prescription in accordance with  
3 State and federal law. The pharmacy must post such information  
4 where prescriptions are filled.

5 (a-5) Physicians may issue multiple prescriptions (3  
6 sequential 30-day supplies) for the same Schedule II controlled  
7 substance, authorizing up to a 90-day supply. Before  
8 authorizing a 90-day supply of a Schedule II controlled  
9 substance, the physician must meet the following conditions:

10 (1) Each separate prescription must be issued for a  
11 legitimate medical purpose by an individual physician  
12 acting in the usual course of professional practice.

13 (2) The individual physician must provide written  
14 instructions on each prescription (other than the first  
15 prescription, if the prescribing physician intends for the  
16 prescription to be filled immediately) indicating the  
17 earliest date on which a pharmacy may fill that  
18 prescription.

19 (3) The physician shall document in the medical record  
20 of a patient the medical necessity for the amount and  
21 duration of the 3 sequential 30-day prescriptions for  
22 Schedule II narcotics.

23 (b) In lieu of a written prescription required by this  
24 Section, a pharmacist, in good faith, may dispense Schedule  
25 III, IV, or V substances to any person either upon receiving a  
26 facsimile of a written, signed prescription transmitted by the

1 prescriber or the prescriber's agent or upon a lawful oral  
2 prescription of a prescriber which oral prescription shall be  
3 reduced promptly to writing by the pharmacist and such written  
4 memorandum thereof shall be dated on the day when such oral  
5 prescription is received by the pharmacist and shall bear the  
6 full name and address of the ultimate user for whom, or of the  
7 owner of the animal for which the controlled substance is  
8 dispensed, and the full name, address, and registry number  
9 under the law of the United States relating to controlled  
10 substances of the prescriber prescribing if he or she is  
11 required by those laws to be so registered, and the pharmacist  
12 filling such oral prescription shall write the date of filling  
13 and his or her own signature on the face of such written  
14 memorandum thereof. The facsimile copy of the prescription or  
15 written memorandum of the oral prescription shall be retained  
16 on file by the proprietor of the pharmacy in which it is filled  
17 for a period of not less than two years, so as to be readily  
18 accessible for inspection by any officer or employee engaged in  
19 the enforcement of this Act in the same manner as a written  
20 prescription. The facsimile copy of the prescription or oral  
21 prescription and the written memorandum thereof shall not be  
22 filled or refilled more than 6 months after the date thereof or  
23 be refilled more than 5 times, unless renewed, in writing, by  
24 the prescriber.

25 (c) Except for any non-prescription targeted  
26 methamphetamine precursor regulated by the Methamphetamine

1 Precursor Control Act, a controlled substance included in  
2 Schedule V shall not be distributed or dispensed other than for  
3 a medical purpose and not for the purpose of evading this Act,  
4 and then:

5 (1) only personally by a person registered to dispense  
6 a Schedule V controlled substance and then only to his or  
7 her patients, or

8 (2) only personally by a pharmacist, and then only to a  
9 person over 21 years of age who has identified himself or  
10 herself to the pharmacist by means of 2 positive documents  
11 of identification.

12 (3) the dispenser shall record the name and address of  
13 the purchaser, the name and quantity of the product, the  
14 date and time of the sale, and the dispenser's signature.

15 (4) no person shall purchase or be dispensed more than  
16 120 milliliters or more than 120 grams of any Schedule V  
17 substance which contains codeine, dihydrocodeine, or any  
18 salts thereof, or ethylmorphine, or any salts thereof, in  
19 any 96 hour period. The purchaser shall sign a form,  
20 approved by the Department of Financial and Professional  
21 Regulation, attesting that he or she has not purchased any  
22 Schedule V controlled substances within the immediately  
23 preceding 96 hours.

24 (5) (Blank).

25 (6) all records of purchases and sales shall be  
26 maintained for not less than 2 years.

1           (7) no person shall obtain or attempt to obtain within  
2           any consecutive 96 hour period any Schedule V substances of  
3           more than 120 milliliters or more than 120 grams containing  
4           codeine, dihydrocodeine or any of its salts, or  
5           ethylmorphine or any of its salts. Any person obtaining any  
6           such preparations or combination of preparations in excess  
7           of this limitation shall be in unlawful possession of such  
8           controlled substance.

9           (8) a person qualified to dispense controlled  
10          substances under this Act and registered thereunder shall  
11          at no time maintain or keep in stock a quantity of Schedule  
12          V controlled substances in excess of 4.5 liters for each  
13          substance; a pharmacy shall at no time maintain or keep in  
14          stock a quantity of Schedule V controlled substances as  
15          defined in excess of 4.5 liters for each substance, plus  
16          the additional quantity of controlled substances necessary  
17          to fill the largest number of prescription orders filled by  
18          that pharmacy for such controlled substances in any one  
19          week in the previous year. These limitations shall not  
20          apply to Schedule V controlled substances which Federal law  
21          prohibits from being dispensed without a prescription.

22          (9) no person shall distribute or dispense butyl  
23          nitrite for inhalation or other introduction into the human  
24          body for euphoric or physical effect.

25          (d) Every practitioner shall keep a record or log of  
26          controlled substances received by him or her and a record of

1 all such controlled substances administered, dispensed or  
2 professionally used by him or her otherwise than by  
3 prescription. It shall, however, be sufficient compliance with  
4 this paragraph if any practitioner utilizing controlled  
5 substances listed in Schedules III, IV and V shall keep a  
6 record of all those substances dispensed and distributed by him  
7 or her other than those controlled substances which are  
8 administered by the direct application of a controlled  
9 substance, whether by injection, inhalation, ingestion, or any  
10 other means to the body of a patient or research subject. A  
11 practitioner who dispenses, other than by administering, a  
12 controlled substance in Schedule II, which is a narcotic drug  
13 listed in Section 206 of this Act, or which contains any  
14 quantity of amphetamine or methamphetamine, their salts,  
15 optical isomers or salts of optical isomers, pentazocine, or  
16 methaqualone shall do so only upon the issuance of a written  
17 prescription blank or electronic prescription issued by a  
18 prescriber.

19 (e) Whenever a manufacturer distributes a controlled  
20 substance in a package prepared by him or her, and whenever a  
21 wholesale distributor distributes a controlled substance in a  
22 package prepared by him or her or the manufacturer, he or she  
23 shall securely affix to each package in which that substance is  
24 contained a label showing in legible English the name and  
25 address of the manufacturer, the distributor and the quantity,  
26 kind and form of controlled substance contained therein. No

1 person except a pharmacist and only for the purposes of filling  
2 a prescription under this Act, shall alter, deface or remove  
3 any label so affixed.

4 (f) Whenever a practitioner dispenses any controlled  
5 substance except a non-prescription Schedule V product or a  
6 non-prescription targeted methamphetamine precursor regulated  
7 by the Methamphetamine Precursor Control Act, he or she shall  
8 affix to the container in which such substance is sold or  
9 dispensed, a label indicating the date of initial filling, the  
10 practitioner's name and address, the name of the patient, the  
11 name of the prescriber, the directions for use and cautionary  
12 statements, if any, contained in any prescription or required  
13 by law, the proprietary name or names or the established name  
14 of the controlled substance, and the dosage and quantity,  
15 except as otherwise authorized by regulation by the Department  
16 of Financial and Professional Regulation. No person shall  
17 alter, deface or remove any label so affixed as long as the  
18 specific medication remains in the container.

19 (g) A person to whom or for whose use any controlled  
20 substance has been prescribed or dispensed by a practitioner,  
21 or other persons authorized under this Act, and the owner of  
22 any animal for which such substance has been prescribed or  
23 dispensed by a veterinarian, may lawfully possess such  
24 substance only in the container in which it was delivered to  
25 him or her by the person dispensing such substance.

26 (h) The responsibility for the proper prescribing or

1 dispensing of controlled substances that are under the  
2 prescriber's direct control is upon the prescriber. The  
3 responsibility for the proper filling of a prescription for  
4 controlled substance drugs rests with the pharmacist. An order  
5 purporting to be a prescription issued to any individual, which  
6 is not in the regular course of professional treatment nor part  
7 of an authorized methadone maintenance program, nor in  
8 legitimate and authorized research instituted by any  
9 accredited hospital, educational institution, charitable  
10 foundation, or federal, state or local governmental agency, and  
11 which is intended to provide that individual with controlled  
12 substances sufficient to maintain that individual's or any  
13 other individual's physical or psychological addiction,  
14 habitual or customary use, dependence, or diversion of that  
15 controlled substance is not a prescription within the meaning  
16 and intent of this Act; and the person issuing it, shall be  
17 subject to the penalties provided for violations of the law  
18 relating to controlled substances.

19 (i) A prescriber shall not pre-print or cause to be  
20 pre-printed a prescription for any controlled substance; nor  
21 shall any practitioner issue, fill or cause to be issued or  
22 filled, a pre-printed prescription for any controlled  
23 substance.

24 (i-5) A prescriber may use a machine or electronic device  
25 to individually generate a printed prescription, but the  
26 prescriber is still required to affix his or her manual

1 signature.

2 (j) No person shall manufacture, dispense, deliver,  
3 possess with intent to deliver, prescribe, or administer or  
4 cause to be administered under his or her direction any  
5 anabolic steroid, for any use in humans other than the  
6 treatment of disease in accordance with the order of a  
7 physician licensed to practice medicine in all its branches for  
8 a valid medical purpose in the course of professional practice.  
9 The use of anabolic steroids for the purpose of hormonal  
10 manipulation that is intended to increase muscle mass, strength  
11 or weight without a medical necessity to do so, or for the  
12 intended purpose of improving physical appearance or  
13 performance in any form of exercise, sport, or game, is not a  
14 valid medical purpose or in the course of professional  
15 practice.

16 (k) Controlled substances may be mailed if all of the  
17 following conditions are met:

18 (1) The controlled substances are not outwardly  
19 dangerous and are not likely, of their own force, to cause  
20 injury to a person's life or health.

21 (2) The inner container of a parcel containing  
22 controlled substances must be marked and sealed as required  
23 under this Act and its rules, and be placed in a plain  
24 outer container or securely wrapped in plain paper.

25 (3) If the controlled substances consist of  
26 prescription medicines, the inner container must be

1 labeled to show the name and address of the pharmacy or  
2 practitioner dispensing the prescription.

3 (4) The outside wrapper or container must be free of  
4 markings that would indicate the nature of the contents.

5 (k-5)(1) Except as provided in paragraph (2) of this  
6 subsection (k-5), when issuing a prescription for an opiate to  
7 a patient 18 years of age or older for outpatient use for the  
8 first time, a practitioner may not issue a prescription for  
9 more than a 7-day supply. A practitioner may not issue an  
10 opiate prescription to a person under 18 years of age for more  
11 than a 7-day supply at any time and shall discuss with the  
12 parent or guardian of the person under 18 years of age the  
13 risks associated with opiate use and the reasons why the  
14 prescription is necessary.

15 (2) Notwithstanding paragraph (1) of this subsection  
16 (k-5), if, in the professional medical judgment of a  
17 practitioner, more than a 7-day supply of an opiate is required  
18 to treat the patient's acute medical condition or is necessary  
19 for the treatment of chronic pain management, pain associated  
20 with a cancer diagnoses, or for palliative care, then the  
21 practitioner may issue a prescription for the quantity needed  
22 to treat that acute medical condition, chronic pain, pain  
23 associated with a cancer diagnosis, or pain experienced while  
24 the patient is in palliative care. The condition triggering the  
25 prescription of an opiate for more than a 7-day supply shall be  
26 documented in the patient's medical record and the practitioner

1 shall indicate that a non-opiate alternative was not  
2 appropriate to address the medical condition.

3 (3) Notwithstanding paragraphs (1) and (2) of this  
4 subsection (k-5), this subsection (k-5) does not apply to  
5 medications designed for the treatment of substance abuse or  
6 opioid dependence.

7 (1) Notwithstanding any other provision of this Act to the  
8 contrary, emergency medical services personnel may administer  
9 Schedule II, III, IV, or V controlled substances to a person in  
10 the scope of their employment without a written, electronic, or  
11 oral prescription of a prescriber.

12 (Source: P.A. 99-78, eff. 7-20-15; 99-480, eff. 9-9-15;  
13 100-280, eff. 1-1-18.)

14 Section 99. Effective date. This Act takes effect upon  
15 becoming law.